DUNMOW RURAL DISTRICT.

REPORT

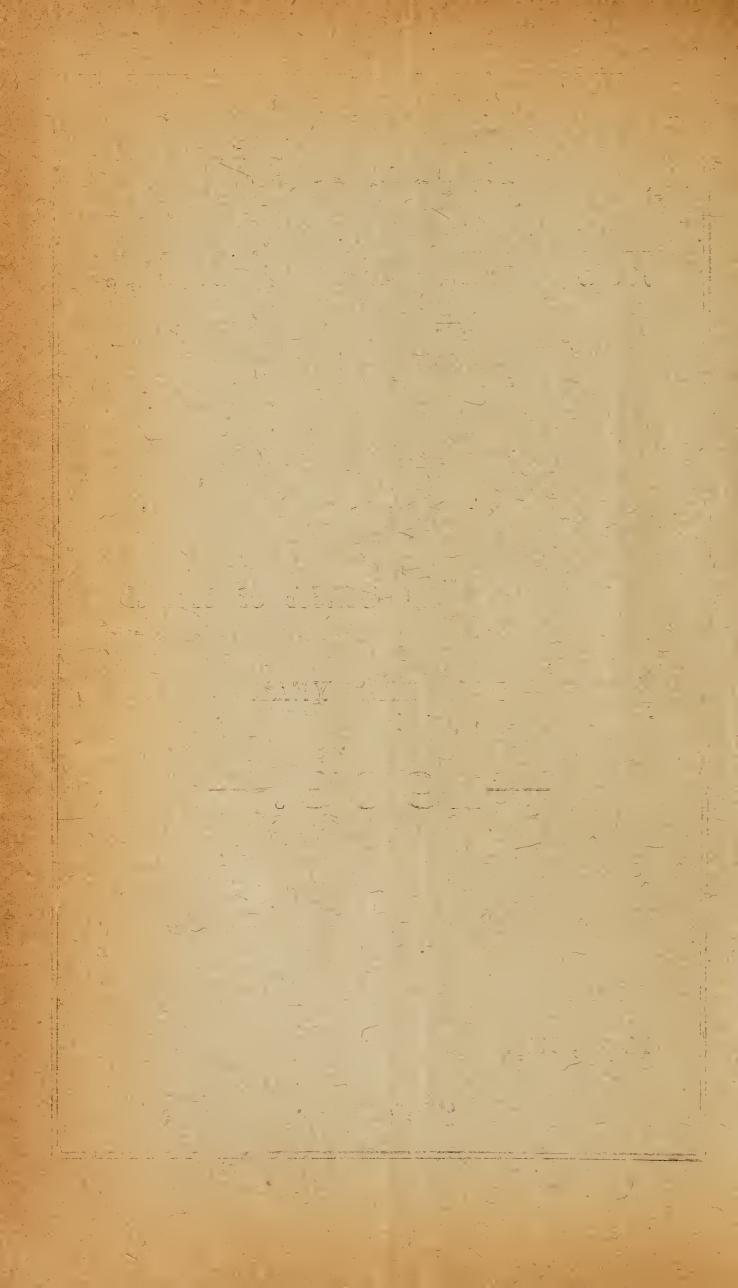
Of the Medical Officer of Health

FOR THE YEAR

-1908.-

Максн, 1909.

CARTER, DUNMOW.



Dunmow Rural District Council.

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Brook House, Great Bardfield, March 3rd, 1909.

To the Chairman and Members of the Dunmow Rural District Council.

GENTLEMEN,

In presenting my tenth Annual Report as Medical Officer of Health, I would wish, firstly, to deal with the Statistical Tables, which, on this occasion, present features of interest. Indeed, it may be claimed from them that the general health of the district is satisfactory.

A reference to Table I, which gives the main vital statistics for eleven years, shows that the birth rate has slightly increased and that the death rate has markedly fallen.

Now, in this table, there are two facts and one supposition which are difficult to reconcile. These rates are calculated on a supposed population of 15,440, it having been assumed that the population had decreased 265 since the census of 1901.

The actual number of deaths registered is 225, or exactly the same as in 1898. Being calculated on a smaller population the death rate is, therefore, slightly higher than in 1898, but lower than the average for the decade, viz., 14.57, as compared with 15.98. The birth rate is also slightly greater than that for the decade, viz., 22.15.

Now, the population must be increasing, decreasing, or stationary. If it is increasing, the death rate would be still lower, viz., 14·3, if calculated on the census of 1901. If it is, on the other hand, decreasing, the birth rate would be even higher than it is now, and, if calculated on a population of 15,200, it would be exactly 22·5.

The third supposition is therefore, I fancy, the correct one, viz., that the population remains stationary, and, if this is so, the general health of the district must be considered satisfactory.

The Infantile Mortality is also extremely low, viz., 19, quite the lowest number for any year for which I have the figures. The average, calculated on the last eighteen years, would be 33.

The death rate from Zymotic diseases is .5.

Table II presents little of interest, as the figures are derived from only two sub-registration districts which are practically homogeneous. The sub-registration district of Thaxted still shows a larger number of births in proportion to the population than Dunmow. This is partly to be accounted for by the 21 births which took place in the Maternity Home at Great Easton. This institution is also responsible for half the illegitimate births mentioned on Table V. The 40 births thus recorded would give a rate of 11.6 per cent., and only half this would belong to the district itself.

The general features of the district have been fully given in my previous reports and have been recently summed up by the Medical Officer of the Local Government Board.

For the sake of future Medical Officers of Health I will briefly recapitulate the information which can be obtained from surface and geological maps. The district, then, consists of 25 rural parishes, having the small town of Dunmow nearly at its centre.

It is drained by three rivers, the Roding, the Chelmer, and the Pant. Of these, the Roding alone rises in the district, viz., at Brook End, Little Easton, whilst the Pant rises near Wimbish, and the Chelmer south of Debden, both in the Saffron Walden Rural District.

The course of the Roding in the district is practically due south, passing through Little Canfield, Great Canfield, High Roding, Leaden Roding and Margaret Roding. It receives no tributaries as it drains a narrow valley.

The Chelmer first enters the district at Thaxted, and passes by Tilty, Great Easton, Little Easton, and Dunmow; below which it receives a small tributary from the parishes of Lindsell and Stebbing; and flows out of the district at Felstead towards Chelmsford, at which latter town it receives the Cann from Great Canfield and High Roding. Its course in the district is south and south east.

The Pant, which rises near Wimbish, is only in the district for a few miles in the parishes of Great and Little Bardfield, its course being south east. Near Witham it receives the Brain, which under the name of the Padsbrook rises in the parish of Great Bardfield. It eventually enters the sea at the Blackwater estuary, and the whole stream is occasionally known as the Blackwater. The Ordnance Survey, however, gives the name Pant to the first 28 miles.

The greater part of the district is in the catchment basin of the combined Chelmer and Blackwater.

Geologically, the district rests principally upon the London clay, over which there is a thick deposit of boulder clay, in parts separated from it by glacial drift gravel. On the surface of the boulder clay in some places are found deposits of post glacial gravel. In the valley of the Pant at Great Bardfield the London clay is replaced by the Reading beds, and further north west by the chalk.

At the census of 1901 the population shewed a marked decrease, viz., 506 males and 463 females, whilst the number of inhabited houses fell from 3,895 in 1891 to 3,739 in 1901.

During the last five years a considerable amount of building has been going on in and around Dunmow, and the next census may show that the decrease has been arrested.

Before reporting on the actual work which has been carried out in the district during 1908, I would beg to invite your attention to some general matters affecting the population, which I would wish to treat concurrently with the Report recently made to the Local Government Board by Dr. Bulstrode.

In the first place I would wish to dissociate myself from the view that, in reporting on the conditions actually found in the Dunmow Rural District, Dr. Bulstrode could have been influenced prejudicially to the Rural District Council by past events of a legal nature. That is to say that the District Council and its officers had been precondemned. Unfortunately, this view was very widely held by individuals, and countenanced by the local press, sensibly weakening the moral weight of his report. This being the feeling in the neighbourhood, it was still further accentuated by the objections which were subsequently made to the source and quality of the recently completed waterworks at Felstead. In this matter there seemed to be a

total disagreement between the County Medical Officer of Health (a justly esteemed authority on water supplies) and the Analyst of the Local Government Board.

On the whole, therefore, I consider Dr. Bulstrode's report to give a fairly true view of the existing conditions, its few inaccuracies being the natural outcome of an attempt to report on twenty-five parishes from facts gathered in a few days visit. Moreover, it can hardly be denied that he was anxious to see the worst features, and these were unhesitatingly pointed out to him by the Sanitary Inspector and myself.

HOUSING ACCOMMODATION AND OVERCROWDING.

In this matter Dr. Bulstrode's report does not materially differ from previous annual reports I have made to the Council. I have drawn attention to the inferior quality of the houses in some of the parishes (1904), and to the better conditions generally prevailing in the more rural places (1907). At the same time I can hardly agree with the statement that "brick cottages generally prevail." As regards overcrowding, the house-to-house inspection, at present being carried out, may bring to light unsuspected cases, but that overcrowding, dirt and dilapidation are at all widely spread I entirely disbelieve. Moreover, seeing the close connection between overcrowding and infantile mortality our rate of 5.8 per cent. compares very favourably with the general rate for rural counties of 9.9. Whenever it occurs, the difficulty of dealing with overcrowding is increased by the want of cottages with more than two bedrooms.

The whole question of the housing of the working classes is difficult of solution, even by much more affluent communities than our own, and I would not wish to under-estimate its necessity.

Such being the case, I consider that the Council would be well-advised should they deal immediately with defects brought to their notice as the house-to-house inspection of the district proceeds. This inspection will naturally take a long time, during which, existing dilapidations will not rectify themselves, and, moreover, much useful experience in dealing with such cases will be gradually acquired.

In bringing pressure to bear on property owners, one is immediately confronted with the question of rents, but I cannot see that this need interfere with the action of a public body,

seeing that the Sanitary Authority in no way compels owners to let their property at unremunerative rates.

The improvement of dwelling houses will, of course, include a strict supervision of existing water supplies, and the creation of fresh ones. On this head I am quite in agreement with what Dr. Bulstrode has written, and should recommend the Council to interpret the words "within a reasonable distance," to mean a very short distance indeed. A reference to my report for 1904 will show that the water supply of the district has already received attention from the officers of the Council. In this report the supply of Dunmow itself is given in considerable detail, and three pages of statistics furnished for the remaining parishes. The water supplies of the Elementary Schools were also tabulated in my report for 1902, and I hardly feel that Dr. Bulstrode's dictum that there has been no attempt to carry out the responsibilities of inspection of water supplies can be justified.

Though I consider that the improvement of the existing dwelling houses at the owners' cost should be the present policy of the Council, I may say that at least one Rural District Council in the County has exercised its powers under the Housing of the Working Classes Act and erected six houses according to the requirements of the Local Government Board.

These cottages are let at a yearly rental of £9 2s. 0d., which is a good deal more than the agricultural labourer is prepared to pay in this district, and there is a deficiency between the rent and expenses, including the repayment of the loan, which requires a rate of $2\frac{3}{4}$ d. in the £.

Moreover, it has been found that the poorest class do not tend to move into modern cottages, but, all the same, there is a general moving up of the population which leaves the very worst cottages untenanted, and enables the Sanitary Authority to take action to have them renovated or closed. (Dr. Thresh's Report to Maldon R.D.C.)

As regards Sewage and Sewage Disposal, I have in previous reports pointed out that there are no proper sewers in the district, merely adaptations from road drains. Such as they are, the Council has always been diligent in maintaining them in good condition, but, as a rule, flushing is insufficient, and ventilation practically absent.

The exception is Felstead, where a tolerably good sewer, properly flushed, is in existence. A reference to this sewer will be found in my report for 1902, and the conditions existing have been much improved.

In reference to the eventual disposal in the district, the question of the pollution of streams is one which will have to be grappled with sooner or later.

As the Chelmer is the river principally affected, I can see no reason why a beginning should not be made near its source at Thaxted.

The conditions obtaining at Thaxted have been frequently alluded to. Not only is the greater part of the sewage of the town collected in a flat bottomed brick culvert, but, when this comes to an end, the effluent flows for more than a quarter of a mile in an open ditch beside the public road, and is discharged untreated into the Chelmer.

The necessity of a proper system at Thaxted is accentuated by the insufficient air space of many of the houses in this town. There not being sufficient garden room, many existing privies require to be done away with altogether and water closets connected with a proper sewer substituted. For the same reason the removal of house refuse should be made a public business.

THE STORAGE AND DISPOSAL OF EXCREMENT REFUSE.

As Dr. Bulstrode points out, the privy and "bumby" are pretty universal in the rural parishes of the district, but the cases mentioned by him of such privies being built over ditches and watercourses are so infrequent as to be almost unknown, and then only in extremely isolated houses.

The fact that "bumbies" are "unprotected from the rain and sun" is undoubtedly true, and more potent agents in the disintegration of refuse than rain and sun have yet to be discovered. However, in the parts of the district in which approximately urban conditions prevail, undoubtedly a system of scavenging is required.

BYE LAWS AND REGULATIONS.

I can thoroughly endorse what Dr. Bulstrode has said on this subject, as the absence of bye laws renders the efforts of the officers of the Sanitary Authority quite ineffectual in many instances. This is more especially so in connection with the erection of new buildings.

This must have been obvious to the Council during the year in reference to the building of a wooden hut near the Watch House Schools at Felstead.

A Code of Bye Laws suitable for a Rural District could hardly impede the building of any houses which would be worth having, and I would point out that the Dunmow Rural District, in parts at any rate, possesses so much natural beauty that it may become in time of a residential character.

Moreover, Bye Laws, if adopted, remain at the discretion of the Council to enforce.

INDUSTRIES OF THE PEOPLE.

The district being mainly agricultural, the greater part of the population works on the land. This labour is practically confined to men, the women being very seldom seen in the fields except at such seasons as pea picking, and their labour is not made a condition of the men's employment.

A part of the agricultural industry has been specialised in the direction of dairy farming and more than half the milk produced finds its way to London.

There are also two breweries in Dunmow, and, in addition to a sweet factory in Thaxted, there are one or two firms of agricultural engineers in the district.

INFECTIOUS DISEASE.

The amount of infectious disease during the year has been exceedingly moderate and tends to decrease from year to year.

Bad sanitary conditions will usually manifest themselves by outbreaks of Typhoid Fever, and of this disease, only two cases have been notified, one at Felstead and the other at Hatfield Broad Oak. Both of these cases were manifestly imported.

SCARLATINA.

The first case notified during the year was at Takeley in a family which had been notified the previous December, and the first case moved into hospital was that of a doctor who had contracted scarlatina in the course of his practice. This was in January, and the district remained free until the end of February when an outbreak occurred on the borders of Felstead parish. The source of infection was obscure, but towards the middle of March there was good reason to trace it to an unnotified case living on the edge of the district. Six cases had been notified at this time, and in April the servant at a public house frequented by the suspected case contracted the disease, and, shortly afterwards a child who used to fetch milk from the same place.

In the meantime the disease had entered the district at another part of the confines of the same parish, there having been some cases close by in the adjoining district. Three cases were notified in the same house.

These were followed by a small outbreak at Felstead Preparatory School, 8 boys and one servant being notified.

The following month, June, an imported case occurred at Hatfield, the second during the year in this parish, and, almost at the same time, three other cases, probably connected with each other but not with the first. With the exception of one other case at Hatfield in November, the source of which could not be traced, the district then remained free from the disease.

DIPHTHERIA.

Three cases occurred early in the year at Thaxted, obviously traceable to a case notified the previous December where untrapped drains and generally bad sanitary conditions had been rectified.

The district then remained free until June when one of the scholars at Felstead College was notified. This was followed by a mild and scattered outbreak in the same parish, eleven cases in all being notified up to the end of the year.

As regards this outbreak I am of opinion that there was no common cause traceable to the district. The incidence of the disease excluded the suspicion of the milk supply, nor could all the cases be attributed to a temporary faulty condition of the street sewer. On this latter head I made a special report to the Council recommending more frequent flushing and the erection of three ventilating shafts. Also the replacement of three old fashioned road gullies.

The weather during the Autumn was exceedingly heavy and much fog prevailed, moreover, there was a general increase of the number of cases notified throughout the County at the same time. Probably owing to the same climatic conditions four cases also occurred in Dunmow, one of which proved fatal.

In several of the houses affected at Felstead minor sanitary defects were found and rectified. One case of the disease was imported into Great Canfield, and a fatal case also occurred at Leaden Roding.

SANITARY WORK DONE, &c.

Five cases of overcrowding have been dealt with during the year and 31 houses have been placed in habitable repair.

The number of new houses, 28, compares favourably with previous years.

The Rural District Council have laid 148 yards of new sewer, with the necessary manholes, in order that several new houses, erected on the Station Estate, Great Dunmow, might be connected.

A defective sewer was found leaking into a cellar at Great Dunmow, and about eleven yards were taken up and relaid with 12 inch glazed stoneware pipes.

At Thaxted, a nuisance arose near a block of cottages close to the Gas works which necessitated the laying of 107 yards of 12 inch sewer.

At Great Bardfield, about 38 yards of 6 inch sewer were laid in order to divert the sewer discharging near the fountain in Brook Street which caused a nuisance.

At Felstead, a contract had been accepted at the end of the year for the erection of three patent sewer ventilating shafts, to replace several road gullies with modern ones, and provide an additional manhole.

Two sewer flushing tanks have also been fixed at Felstead and are supplied with water from the new waterworks.

During the year the drains of 87 houses have been repaired and trapped or relaid and ventilated.

The condition of the sewer at Felstead may now be said to be fairly satisfactory; but at Great Dunmow, Thaxted, Great Bardfield, Stebbing, Great Easton, High Easter, Hatfield Broad Oak, and Takeley, as I have already said, the sewers were formerly road drains, and, with few exceptions, the only satisfactory part of them is that which has been relaid from time to time by the Council. Most of the sewage is discharged into cesspools and ditches which are cleaned out when necessary. Improvements, both as regards sewers and sewage disposal, are especially needed at Great Dunmow and Thaxted.

EXCREMENT DISPOSAL.

At Great Dunmow there are 270 water closets, about 220 of which are hand flushed, 16 pail closets, and 97 cesspit privies. There are also many hand flushed water closets in the town of Thaxted and the village of Felstead. In other parts of the district cesspit privies prevail with some pail closets. There are also some water closets at the larger houses which have drains and cesspits. Privies and pail closets are emptied on gardens and allotments.

REMOVAL OF REFUSE.

The Rural District Council not undertaking this necessary matter, occupiers remove their own refuse. At Great Dunmow a tip has been provided during the year where this can be done.

WATER SUPPLY.

During the year the Mid-Essex District Water Company, Ltd., have completed and opened waterworks at Great Dunmow and Felstead.

The supply at Great Dunmow is obtained from the chalk; particulars of which were given in my last Annual Report. The water is pumped to a covered concrete reservoir, holding 50,000 gallons, and is distributed to all parts of the town by means of cast-iron pipes.

The supply at Felstead is derived from a very strong spring and collected in a covered tank, from which it is pumped to an elevated steel cylinder and delivered to all parts of the village through steel tubes. Both supplies are of good quality, and already 82 houses at Great Dunmow and 20 houses at Felstead have been connected to the mains.

The Hatfield Broad Oak Water Company has undertaken to supply Hatfield Broad Oak and Hatfield Heath with water which they are obtaining from the Herts. and Essex Water Company's Works. The mains are already being laid and it is hoped that the work will be completed in a few months.

Other parts of the district are supplied with public and private wells, varying much in quality and distribution. The supply at Thaxted is not convenient, and here waterworks might be considered, especially if any sewage scheme was carried out.

Common Lodging Houses.

There is only one common lodging house in the district, which is situated at Church End, Great Dunmow, and is allowed to take up to sixteen persons per night. During the year 2,983 lodgers have been received, an average of just over 8 per night. The premises were lime-washed during the first weeks of April and October, as required by the Public Health Act, and several repairs have been done to the roof and floors by the owner after his attention had been drawn to the matter.

The premises changed hands during the year, the new occupier being registered as keeper after producing a satisfactory certificate of character.

SLAUGHTER HOUSES.

There are sixteen slaughter houses in the district, all of which have been inspected several times during the year.

No seizures of unsound meat have been made.

There are no bye-laws for the regulation of slaughter houses in force, but I think some are required.

KNACKERS' YARDS.

There are two licensed knackers in the district, one at Great Dunmow, and one at Margaret Roding. No boiling is done on the premises, and no complaints have been received during the year.

Dairies and Cowsheds.

During the year 53 dairies and 71 cowsheds have been inspected. The drainage of five cowsheds and three dairies has been improved, and more light has been provided in three cow-

sheds in order to comply with the regulations. There is much room for improvement as regards cleanliness in some of the cowsheds, the large manure yards adjoining some of them being undesirable.

There are 52 registered cowkeepers, owning over 800 cows.

ELEMENTARY SCHOOLS.

There are 30 primary schools in the district, all of which have been inspected during the year. The accommodation provided far exceeds the number of children on the books. During the year the drinking water wells have been cleansed and the drainage and closets improved at Lindsell, Felstead, and Rayne End schools. The walls of several schools have also been distempered, and two schools have been disinfected.

FACTORY AND WORKSHOPS' ACT.

There are 136 workshops, including 36 bake-houses on the register, and during the year 77 inspections of ordinary workshops have been made. Each bake-house has been inspected at least twice, in order to enforce the special regulations as to limewashing every six months.

Two lists of outworkers have been received by the Council.

INFECTIOUS DISEASE.

All the infected houses were visited by the Sanitary Inspector and the majority of them by myself. Disinfectants were supplied and school teachers notified when necessary.

Thirty-eight houses were disinfected, including two schools, after the occurrence of the infective fevers, and two houses after deaths from pulmonary tuberculosis.

In conclusion, I would beg to thank the Council for the very kind way in which they recommended my further re-appointment as Medical Officer of Health last October.

I remain, Gentlemen,
Your obedient servant,
EDMUND E. GOODBODY.

TABLE I.

DUNMOW RURAL DISTRICT.

Vital Statistics of Whole District during 1908 and Previous Years.

								_			_	_			
NETT DEATHS AT ALL AGES	BELONGING TO THE DISTRICT.	Rate.*	13	14.06	18.80	16.91	15.08	15.75	15.00	15.67	14.44	14.20	15.80	15.62	14.5
NETT DEATH AT ALL AGES	BELONGING TO THE DISTRICT.	Number	12	225	299	277	236	246	233	243	223	227	244	245.3	224
Deaths of Residents	registered in Public	Q	District.	:	•	:	:			:	-		c 1	:	. 2
Deaths of Non-	residents registered	in Public Instituti- ons in the	District.	:		¢.1	:	:	:		4	-	12	÷	3
Total Deaths	IN PUBLIC INSTITU-	TIONS. IN THE DISTRICT.	6	24	55	28	35	82	31	24	6;c —	56	46	30	34
ED IN	Ages.	Rate.*	∞	14.06	18.80	17.01	14.96	15.57	15.00	15.67	14.63	14.70	16.45	15.98	14.57
SEGISTER TRICT.	At all Ages.	Number	2	225	299	279	235	246	233	242	526	227	254	246.6	225
TOTAL DEATHS REGISTERED THE DISTRICT.	Under 1 Year of Age	Rate per 1,000 Births	registered.	82.88	94.20	06.06	87.19	72.84	62.92	60.26	91.71	91.12	74.38	85.91	55.55
TOTAL	Under 1	Number	ಸಂ	31	34	31	35	22	28		31	28	22	2.67	19
rhs.		Rate.*	4	23.36	22.22	21.57	22.73	19.28	23.64	55.00	21.89	19.17	23.51	21.97	22.15
BIRTHS.		Number	က	374	359	341	367	302	367	340	338	306	363	345	342
	Population estimated to	Middle of each Year.	61	15,999	15,902	15,805	15,705	15,609	15,520	15,440	15,440	15,440	15,440	15,630	15,440
	VEAR		Ļ	1898.	1899.	1900.	1901.	1902.	1903.	1904.	1905.	1906.	1907.	Averages for years 1898—1907.	1908.

* Rates in Columns 4, 8, and 13 calculated per 1,000 of estimated population.

Area of District in acres (exclusive of area 573,501. covered by water.)

Total population at all ages, 15,705

Number of inhabited houses, 3,741

Average number of persons per house, 4 of 1901.

Other Institutions, the deaths in which have been distributed among the several localities in the District.	Isolation Hospital, Dunmow Bishop's Stortford Hospital	istrict? YES.
II. Institutions outside the District receiving sick and infirm persons from the District.	Addenbrooke's Hospital, Cambridge.	Is the Union Workhouse within the District? YES.
Institutions within the District receiving sick and infirm persons from outside the District.	Union Workhouse, Great Dunmow Eden Cottage Hospital, Hatfield Broad Oak.	Is the Union

TABLE II.

Vital Statistics of separate Localities in 1908 and previous years. DUNMOW RURAL DISTRICT.

جي ا	l year.		10 88 12 13 14 14 14 15 16 17 17 18 18 18 18 18 18 18 18 18 18 18 18 18	
strict	Deaths under	d.	010000000000000000000000000000000000000	6
3. THAXTED.	Deaths at all Ages.	c.	47 62 62 71 71 58 58 105 91 88 108	8.
Registration of THA	Births regis-	6.	81 88 87 73 73 82 75 141 157 132 116	160
Regi	Population esti- mated to middle of each Year,	a.	3246 3223 3200 3175 3153 3153 3123 6550 6550 6550 6550	6550
trict	Deaths under I year.	d.	$\begin{array}{c} 8\\111\\7\\13\\6\\\cdots\end{array}$	
2. ration Sub-district STEBBING.	Deaths at all Ages.	c.	76 95 43 34 71 72 92 71 57 50 61 65 64 65 68 80 58 Combined Registration Sub-District	
ration STEI	Births regis-	.6	76 95 34 71 32 71 50 61 64 48 80 Sub-District	
Regist	Population estinated to middle of each Year.	a.	3676 3634 3592 3550 3508 3448 Com	
brict	Deaths under I year.	d.	13 20 16 7 7 9 19 18 18 18 18	10
1. Registration Sub-district of DUNMOW.	Deaths at all Ages.	<i>C</i> .	1111 142 151 1114 135 135 138 138 138 138	134
stration Sub of DUNMO	Births regis- tered.	6.	198 202 183 233 156 212 199 181 174 197	182
Regist	Population estinated to middle of each Year.	a.	9072 9040 9008 8980 8949 8920 8890 8890 8890 8890 8890	8880
NAMES OF LOCALITIES.	Y BAR.		$\begin{array}{c} 1898 \\ 1899 \\ 1900 \\ 1901 \\ 1902 \\ 1903 \\ 1904 \\ 1906 \\ 1906 \\ 1907 \\ Averages of \\ Vears 1898 \\ Vears$	1908

Annual Report of Medical Officer of Health for the year 1908, for the Rural District of Dunmow,

on the administration of the Factory and Workshop Act, 1901, in connection with

FACTORIES, WORKSHOPS, WORKPLACES AND HOMEWORK.

1.—INSPECTION.

		Number of	
Premises.	Inspection	s. Written Notices.	Prosecutions
Factories (Including Factory Laundries.)			
Workshops (Including Workshop Laundries.)	113		
Workplaces			
Total	113	0	0
2.—DEFECT	S FOUND).	
	Number	of Defects.	Number
Particulars.	Found. Rem	nedied. Referred to H.M. Inspector	of Prosecutions

	Nu	mber of De	efects.	Number
Particulars.	Found.	Remedied.	Referred to H.M. Inspector	of Prosecutions
Nuisances under the Public Health Acts:— Want of cleanliness Want of ventilation Overcrowding Want of drainage of floors Other nuisances Sanitary accommodation (insufficient) unsuitable or defective not separate for sexes Offences under the Factory and Workshop Act:— Illegal occupation of underground bakehouse (s. 101) Breach of special sanitary requirements for bakehouses (ss. 97 to 100)			Inspector	
Other offences				
Total	Nil.	Nil.	Nil.	Nil.

3.-HOME WORK.

Nature of Work.	Lists recei	ved from E	orkers.		Inspec-
Wearing apparel, making, &c.	2		2	2	2

4.—REGISTERED WORKSHOPS.

Workshops on the Register (s. 131) at the end of the year.	Number.
Manufacturer of Confectionery 1, Saddlers 7, Coppersmiths 1, Cycle Repairers 5, Milliners 5, Dressmakers 19, Tailors 8, Plumbers 1, Wheelwrights, 10, Cabinet Makers 1, Carpenters 7, Boot and Shoe Makers 12, Coachbuilders 4, Smiths 18, Brickmakers 1, Bakehouses 36	
Total number of workshops on Register	136

5.—OTHER MATTERS.

Class.	Number.
Matters notified to H.M. Inspector of Factories:— Failure to affix Abstract of the Factory and Workshop Act	
Action taken in matters referred by Notified by H.M. Inspector H.M. Inspector as remediable under the Public Health Acts, but not under the Factory and Workshop Act (s.5.) Reports (of Action taken) sent to H.M. Inspector	
Other	
Underground Bakehouses (s. 101):— Certificates granted during the year	
In use at the cnd of the year	

SUMMARY OF WORK done through the Sanitary Inspector in the Rural Sanitary District of Dunmow during the year ending December 31st, 1908.

		TOTAL No. FOR YEAR.			TOTAL No. FOR YEAR.
					-
1.	Complaints received	. 29	19.	Houses erected or re-built for	
2.	Nuisances detected without	t		which Water "Certificates"	28
	complaint	178	90	were applied	
3.	Nuisances abated	. 192	20.	"Certificates" granted	25
4.	Notices served	. 82	21.	" deferred …	3
			22.	Wells sunk or improved supplies of Water afforded	9
5.	Summonses taken out	0	23.		8
6.	Convictions	. 0		Wells cleansed or repaired	_
7.	Cottages inspected	730	24.	Wells closed	0
8.	Lodging-houses inspected	. 1	25	Houses connected with sewers	30
		-	26	Houses connected with water mains	102
9.	Slaughter-houses inspected	. 16	27	Earth, pail, or improved	102
10.	Bakehouses inspected	. 36		Privies constructed or exist-	
11.	Dairies and Milk Shops in	-		ing Privies altered	47
	spected	. 53	28	Privies and W.C.'s repaired;	
12.	Cowsheds inspected	. 71		W.C.'s supplied with water	21
13.	Workshops inspected	. 77	29	Cisterns cleansed, repaired, or covered	0
14.	Filthy houses cleansed, sec. 4		30	Animals improperly kept re-	O
	Public Health Act, 1875	. 4	00	moved	4
15.	Houses disinfected	. 38	31	Samples of water taken for	
16.	Overcrowding abated	. 5		Analysis	12
17.	Houses placed in habitable		32	Compensation paid for de-	
10	repair			struction of infected bedding	0
18.	Houses closed	. 1	33	Seizures of unsound Meat, &c.	0

DUNMOW RURAL DISTRICT.

Cases of Infectious Disease notified during the Year 1908.

		CAS	SES NOT	IFIED I	N WHO	LE				To	ral (CASES	NOT	IFIEI) IN	EACE		15.				
Notifiable		1		t Ages-				1.	2.	3. pa	4. ye	5.	f. plo	7.	s. Let	9. g 50	10. 80 u	11.	12.	13.	14.	Cases red to
DISEASE.	At all Ages.	Under 1	1 to 5	5 to 15	15 to 25	25 te 65	65 and upwds.	Great Dunmow	Little Dunmow	Felstead	Hatfield Bd. Oak	High Easter	Great	High Roding.	Margaret Roding	Leaden Roding.	Stebbing	Thaxted	Great Bardfield	Takeley	Little Saling.	Fotal Cases removed to
Small-pex																						
Cholera																				•••		•••
Diphtheria including Membranous croup	20		2	11	3	4		4		11			1			1		3	***			11
Erysipelas	21			1		16	4	12	1			1		1	1		2		1		2	
scarlet fever	28		5	13	7	3				20	7									1		15
Pyphus fever																						
Enteric fever	. 2				1	1				1	1											
Relapsing fever							¥															
Continued fever																						
Puerperal fever			·																			3
Plague																						
Tetals	71	-	7	25	11	24	4	10	i 1	32	8	1	1	1	1	1	2	3	1	1	2	26

Isolation Hospital,-Great Dunmow.

Total available beds, 8.

Number of Diseases that can be concurrently treated, 2.



TABLE IV.

DUNMOW RURAL DISTRICT. Causes of, and Ages at, Deaths during Year 1908.

	DEATE WHI	IS AT THETHER (OCCURE	OINED A	OR B	"Resi	DENTS"	Di	SATHS	AT	ALL	AGES	OF	"RE	SIDEN	TS"	BELS	ONGIN THE		Loc TRICT		IES,	WHE	THER	occi	URRI	NG I	N OR	BEY	OND	Total Deaths whether of
Causes of Death.	All ages.	Under 1 year.	1 and under 5.	7	15 and under 25.	ző and under 65		Great Dunniow.	Little Dunmow.	Felstend.	Hatfield Broad Oak.	High Easter.	Barnston.	Great Canfield.	High Roding.	White Roding.	Margaret Roding.	Leaden Roding.	Stebbing.	Thunted.	Great Bardfield.	Lindsell.	Takeley.	Great Easton.	Little Baston.	Little	Little	Broxted.	Tilty.	Chickney.	or "Non- Residents" in Public Institutions in the District.
1.	2.	3.	4.	5.	6.	7.	8.	9.	10.	11.	12.	13.	14	15.	16.	17.	18.	19,	20.	21.	22.	23.	24.	25.	26.			29.		31.	32.
Small-Pox													\														l				
Measles	2	1	1					1		1																					
Scarlet Fever																															
Wheeping-cough	1		1					ŧ		1						***															
Diphtheria and Mem-	2			1			1	1				1																			1
branous eroup Croup																															
(Typhus	•••																														
Fover Enterio	1					1					1																				1
Other continued																															
Dath. In Comme	2		1				1		1	1						•••															
(Usalam)		•••			•••						•••	•••	•••		***	•••	•••		•••			•••	•••		•••	***	•••			•••	•••
	***	***	•••	•••				•••	***	***	•••	***	•••	•••	•••				•••		•••	•••	•••	•••	•••	• • • • • • • • • • • • • • • • • • • •	•••	***		•••	
Plague	1	1	***						• • • •	***		•••		•••		•••	•••			•••		•••	•••	•••	•••	•••				***	•••
Diarrhoa	9		•••	***		***					1	•••	•••	•••	•••	•••	***	•••				•••	•••		•••	***	•••	•••	•••		
Enteritis	3	3	•••	•••	***	•••		•••	•••	• • •	•••		•••	•••		***	•••	•••	***	3	***	•••	•••	•••	***	•••	•••	•••	•••		
Pnerperal fever			•••	•••	***		•••		•••		•••	•••	• • •		•••	•••	•••					•••	•••		•••		•••	•••			
Erysipelas Phthisis (Pulmonary	4,		•••	•••		•••	4	1	•••	•••	***	1	•••		•••		•••		1		•••			•••			1	•••	•••		1
Tubereulosis)	14	•••	•••		3	7	4	3	***	2	•••	1	2	1		•••	1			1			1	•••	2)				1
Other tuberculous diseases	6	1	1	3	1	•••		1		•••	1	1		•••		•••				3									•••		1
Cancer, malignant disease	19		•••	•••	***	6	13	1	1	1	1	2		2				1	1		1	1		3	1	1		2			2
Brenchitis	26	2	2	***		3	19	7	1	1		2		2	2			1		3		1	1	4	•••	•••	1				4
Pneumonia	7		4	1	1	1		1		3	2						1														1
Plonrisy	1		•••				1		1																						
Other diseases of Respiratory organs	3		•••	1	•••	2					1									1									1		
Alcoholism Cirrhosis of liver }	1		•••				1	***											1							• • •					
Venereal diseases	1	1		***	•••			•••																1							
Premature birth	6	6						2		2									1		1										
Diseases and accidents of parturition	3		•••			3						1				1				1	(
Heart diseases	26		***	2	1	8	15	5		5		1			1		1	1	2	2	3	1	3				1				4
Aocidents	6		1	1		2	2	1											2	1	1									1	
Suicides	2		•••			1	1	,		1										1											
All other causes	87	-1.		1	1	12	69	10	1	13	7	5	1	2			1		4	13	7	5	6	3	4	1			1		18
All causes	224	19	11	10	7	46	131	34	5	31	14	15	3	7	3	i	4	3	12	29	13	8	11	11	7	2	3	5	2	1	34



TABLE V.

DUNMOW RURAL DISTRICT.

INFANTILE MORTALITY DURING THE YEAR 1908.

Deaths from stated Causes in Weeks and Months under One Year of Age.

CAI	USE OF DEATH.	Under 1 Week.	1-2 Weeks.	2-3 Weeks,	3-4 Weeks.	Total under 1 Month.	1-2 Months.	2-3 Months.	3-4 Months.	+5 Months.	5-6 Months.	6-7 Months.	7-8 Months.	8.9 Months.	9-10 Months.	10-11 Months.	11-12 Months.	Total Deaths under One Year.
AII Causes. {	Cortified																	
1, Common Infections Discuses	Small-pox Chicken-pox Measles Scarlet Fever Diphtheria: (including Membranous Croup) Whooping Cough Diarrheea, all forms Enteritis, Muco-cuteritis,							1				1						1 2
Diarrhoad Diseases, 3. Wasting Diseases,	Gastro-enteritis Gastritis, Gastro-intestimal Catarrh Premature Birth Congenital Defects Injury at Birth Wunt of Breast-milk Starvation	3 2	1			1 1 2										1		4 2
4. Tuberenlous Disenses.	Atrophy, Debility, Murasmus Tuberculous Meningitis Tuberculous Peritonitis: Tabes Mesenterica Other Tuberculous Diseases				1	1			1									2
5, Other Canses.	Erysipelas Syphilis Rickets Meningitis (not Tuberculous Convulsions Bronchitis Laryngitis Pneumonia Snffocation, overlying Other Canses	1	1		1 1	1 3	1							1			1	1 3 2
		7	2		3	12	1	1	1			1		1	1	1	1	19

Population,

Estimated to middle of 1908, 15,440.

Births in the year $\begin{cases} \text{legitimate } 302. \\ \text{illegitimate } 40. \end{cases}$ Deaths in the year $\begin{cases} \text{legitimate infants } 18. \\ \text{illegitimate infants } 1. \end{cases}$ Deaths from all Causes at all Ages 225.

